03/18/2002 01 FC:218



P. A.

PTO/SB/Z2 (10-00)

Approved for use through 10/31/2002. OMB 0661-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE 15/02

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		1	Docket Number (Optional) IMI-002	
In re Application of Christian, S.T.				
	Application Number 09/547,501		Filed April 12, 2000	
	For Novel Pharmaceutical Agents Containing Carbohydrate Moieties.			
	Group Art Unit 1617	Examiner	Jiang, Shaojia A.	
This is a request under the provisions of 37 CFR 1.138(a) to extend the period for filing a reply in the above identified application.				
The requested extension and appropriate non-small-entity fee are as follows (check time period desired):				
One month (37 CFR 1.17(a)(1))			\$	
Two months (37 CFR 1.17(a)(2))			\$	
Three months (37 CFR 1.17(a)(3))			\$	
Four months (37 CFR 1.17(a)(4))			\$ 1,440	
Five months (37 CFR 1.17(a)(5))			\$	
Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$720.00 A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Commissioner has already been authorized to charge fees in this application to a Deposit Account. The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1159 I have enclosed a duplicate copy of this sheet. I am the applicant/inventor APERINES 00000001 Statement of record of the entire interest. See 37 CFR 3.71. Statement of record. Attorney or agent of record. Attorney or agent under 37 CFR 1.34(a), Registration number if acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). Credit card information should not				
be included on this form. Provide credit card information and authorization on PTO-2038.				
March 11, 2002 Date Signature John S. Sundsmo, 34,446 Typed or printed name				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
Total offorms are submitted.			· · · · · · · · · · · · · · · · · · ·	

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will very depending upon the needs of the Individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Weshington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Assistant Commissioner for Patents, Weshington, DC 20231.

Adjustment date: 05/12/2003 EEKUBAY1 03/18/2002 MPEOPLES 00000001 501159 09547501 01 FC:218 720.00 CR

PTO/SB/06 (8-96) Approved for use through 9/30/98. OMB 0651-032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Representation anless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 09/547,501 (IMI-002) OTHER THAN CLAIMS AS FILED - PART I SMALL ENTITY SMALL ENTITY (Column 2) (Column 1) FOR & NUMBER FILED NUMBER EXTRA RATE RATE BASIC FEE \$ OR \$ (37 CFR 1.16(a)) TOTAL CLAIMS minus 20 = OR (37 CPR 1.16(c)) INDEPENDENT CLAIMS minus 3 -OR (37 CFR 1.16(b)) MULTIPLE DEPENDENT CLAIM PRESENT (37 CPR 1.16(d)) OR TOTAL QR. TOTAL If the difference in column) is less then zero, enter "0" in column 2 OTHER THAN CLAIMS AS AMENDED - PART II SMALL ENTITY OR (Column I) SMALL ENTITY (Column 2) (Cohmp 3) Same of the City **CLAIMS** HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT a - - in RATE TIONAL RATE TIONAL **AMENDMENT** AFTER **PREVIOUSLY EXTRA** FEE FEE **AMENDMENT** PAID FOR Total **OR** Minus 46 ·2. 0 (37 CFR 1.16(c)) OR Independent Minus 6 1 (37 CFR 1.16(b)) 0 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL 0 ADDIT. FEE (Column 1) ADDIT. FEE (Cohimn 2) (Cohimn 3) CLAIMS HIGHEST ADDI-ADDI-B REMAINING NUMBER PRESENT RATE TIONAL RATE TIONAL **AMENDMENT** 種的傳統等 AFTER **PREVIOUSLY** EXTRA FEE FEE AMENDMENT PAID FOR OR Toml Minus _ (37 CFR 1,16(c)) OR Independent Minus (37 CFR 1.16(6)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CHR 1.16(d)) OR TOTAL TOTAL OR TOTAL ADDIT, FEE ADDIT, FEE (Column 1) (Column 2) (Column 3)

CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL TIONAL RATE **AMENDMENT** AFTER **PREVIOUSLY** EXTRA FEE FEE AMENDMENT PAID FOR. Total (37 CFR 1.16(c)) OR Minus х\$ OR Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CPK 1.16(4)) OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE

[&]quot; If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is loss than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the resets of the individual case.

Any comments on the amount of time you are required to complete this form should be sone to the Chief Information Officer, Patent and Frademark, Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Paucie, Washington, DC 20231.